



Division of Laboratory Services
630 Hart Lane
Nashville, TN 37216
615-262-6300

<https://www.tn.gov/health/health-program-areas/lab.html>

Disease/Agent Suspected or Test Requested:

Campylobacter species

Provider Requirements	Isolate or specimen submission REQUIRED
Acceptable Specimen Sources/Type(s) for Submission	<ul style="list-style-type: none">• Stool• Culture Isolate
TDH Requisition Form Number	PH-4182
Media Requirements	<ul style="list-style-type: none">• Stools:<ul style="list-style-type: none">• C & S Culture Transport Media (orange cap)• Isolates:<ul style="list-style-type: none">• Broth• Non-selective media slant: TSA, Chocolate, Blood
Special Instructions	
Shipping Instructions	<ul style="list-style-type: none">• Ship Room Temperature/Ambient• Microaerophilic conditions
Laboratory Section Performing Testing	Enterics
Lab Location(s) Performing Test	Nashville

All infectious substance shipments must conform to U.S. Department of Transportation (DOT) Hazardous Materials Regulations (HMR 49 C.F.R Parts 171-180).